

Attachment A

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF WEST VIRGINIA

FILED

MAR 01 2021

U.S. DISTRICT COURT-WVND
MARTINSBURG, WV 25401

CORY BAILEY

Your full name

FEDERAL CIVIL RIGHTS

COMPLAINT *Bailey, Mazzucco*
(BIVENS ACTION) *Black*

v.

Civil Action No.: 5-21-cv-32

(To be assigned by the Clerk of Court)

(10) U.S.P HAZELTON

SHU LT COAKLEY c/o RIFFLE
c/o SEIFERT COMPOUND

SHU OFFICERS

COMPOUND LT WARE c/o WORTZING

COMPOUND LT SAUNDERS c/o McCarthy

c/o D. DILLON

c/o VERNON
c/o PROCTOR

PSYCHOLOGY DR BANIAK

Enter above the full name of defendant(s) in this action

I. JURISDICTION

This is a civil action brought pursuant to **Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics, 403 U.S. 388 (1971)**. The Court has jurisdiction over this action pursuant to Title 28 U.S.C. §§ 1331 and 2201.

II. PARTIES

In Item A below, place your full name, inmate number, place of detention, and complete mailing address in the space provided.

A. Name of Plaintiff: Cory Bailey Inmate No.: 15887-028
Address: U.S.P McCreary P.O. Box 3000 Pine Knot, Ky 42635

In Item B below, place the full name of each defendant, his or her official position, place of employment, and address in the space provided.

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B. Name of Defendant: Compound LT WARE
Position: COMPOUND LT
Place of Employment: U.S.P Hazelton
Address: U.S.P Hazelton P.O.Box 2600
Bruce ton mill, WV 26525

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? ☒ Yes ☐ No

If your answer is "YES," briefly explain: ~~COMPOUND LT SAUNDERS~~
CURSED MY WITH DARAGATORY LANGUAGE

B.1 Name of Defendant: COMPOUND LT SAUNDERS
Position: COMPOUND LT
Place of Employment: U.S.P HAZELTON
Address: _____

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? ☒ Yes ☐ No

If your answer is "YES," briefly explain: Informed his officers
to be aggressive

B.2 Name of Defendant: 90 SEIFERT
Position: COMPOUND
Place of Employment: U.S.P HAZELTON
Address: _____

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? ☒ Yes ☐ No

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If your answer is "YES," briefly explain: THRUSTED MY HEAD INTO
THE WALL AND ALSO FORCED MY ARMS TO A UNBENDABLE
POSITION

B.3 Name of Defendant: YO VERNON
Position: SHU OFFICER
Place of Employment: U.S.P HAZELTON
Address: _____

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? ☒ Yes ☐ No

If your answer is "YES," briefly explain: PULLED MY RIST AND ARMS
THROUGH THE FOOD SLOT AND pulled and bent them
causing pain

B.4 Name of Defendant: YO DILLON
Position: SHU officer
Place of Employment: "
Address: "

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? ☒ Yes ☐ No

If your answer is "YES," briefly explain: Pulled my hair out
panged me head into the floor repeatedly called
me out of my name

Defendant: SHU LT Coakley

Employment: USP Hazelton

YES Acted under the authority of color

explain: Tightend my handcuffs so tight my hand swelled bleed and went numb for (12 hours)

Defendant: % Worthing

Employment: USP Hazelton

Yes Acted under the authority of color

explain: Cut my institutional clothes off of my body with a knife just to place me in paper situ clothing to be shackled for (12 hours)

Defendant: M^cCarthy

Employment: USP Hazelton

Yes Acted under the authority of Color

explain: Struck me in my face several times with blunt force

Defendant: DR Baniak

Employment: USP Hazelton

Yes Acted under the authority of color

explain: Told me I didnt care about my family because I was suicidal and also did not report the assault by staff

Defendant: C/o Proctor

Employment: USP Hazelton

Yes Acted under the authority of color

explain: I asked c/o Proctor for help and ask why he allowed SHU officers to influence his behavior toward me and allowed the SHU LT to call us niggers

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B.5 Name of Defendant: Yo Riffle
Position: SHU officer
Place of Employment: "
Address: "

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? ☒ Yes ☐ No

If your answer is "YES," briefly explain: Smashed my face into the floor with the shield

III. PLACE OF PRESENT CONFINEMENT

Name of Prison/ Institution: U.S.P Hazelton

A. Is this where the events concerning your complaint took place?
☒ Yes ☐ No

If you answered "NO," where did the events occur?

B. Is there a prisoner grievance procedure in the institution where the events occurred? ☒ Yes ☐ No

C. Did you file a grievance concerning the facts relating to this complaint in the prisoner grievance procedure?
☒ Yes ☐ No

D. If your answer is "NO," explain why not: _____

E. If your answer is "YES," identify the administrative grievance procedure number(s) in which the claims raised in this complaint were addressed

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and state the result at level one, level two, and level three. **ATTACH GRIEVANCES AND RESPONSES:**

LEVEL 1 I was transferred to U.S.P McCreary

LEVEL 2 Without receipt of grievances

LEVEL 3 _____

IV. **PREVIOUS LAWSUITS AND ADMINISTRATIVE REMEDIES**

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action? ☐ Yes ☒ No

B. If your answer is "YES", describe each lawsuit in the space below. If there is more than one lawsuit, describe additional lawsuits using the same format on a separate piece of paper which you should attach and label: "IV PREVIOUS LAWSUITS"

1. Parties to this previous lawsuit:

Plaintiff(s): _____

Defendant(s): _____

2. Court: _____
(If federal court, name the district; if state court, name the county)

3. Case Number: _____

4. Basic Claim Made/Issues Raised: _____

5. Name of Judge(s) to whom case was assigned: _____

6. Disposition: _____
(For example, was the case dismissed? Appealed? Pending?)

7. Approximate date of filing lawsuit: _____

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8. Approximate date of disposition. Attach Copies: _____
- C. Did you seek informal or formal relief from the appropriate administrative officials regarding the acts complained of in Part B?
☒ Yes ☐ No
- D. If your answer is "YES," briefly describe how relief was sought and the result. If your answer is "NO," explain why administrative relief was not sought.
Informal complaint out of general population

- E. Did you exhaust available administrative remedies?
☐ Yes ☒ No
- F. If your answer is "YES," briefly explain the steps taken and attach proof of exhaustion. If your answer is "NO," briefly explain why administrative remedies were not exhausted.

- G. If you are requesting to proceed in this action *in forma pauperis* under 28 U.S.C. § 1915, list each civil action or appeal you filed in any court of the United States while you were incarcerated or detained in any facility that was dismissed as frivolous, malicious, or for failure to state a claim upon which relief may be granted. Describe each civil action or appeal. If there is more than one civil action or appeal, describe the additional civil actions or appeals using the same format on a separate sheet of paper which you should attach and label "G. PREVIOUSLY DISMISSED ACTIONS OR APPEALS"
1. Parties to previous lawsuit:

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Plaintiff(s): Cory Bailey
 Defendant(s): _____

2. Name and location of court and case number:
District Court Northern District of WV
217 West King St Martinsburg, WV 25401
3:20-cv-66
3. Grounds for dismissal: ☐ frivolous ☐ malicious
☐ failure to state a claim upon which relief may be granted
4. Approximate date of filing lawsuit: May 2020
5. Approximate date of disposition: _____

V. STATEMENT OF CLAIM

State here, as **BRIEFLY** as possible, the facts of your case. Describe what each defendant did to violate your constitutional rights. **You must include allegations of specific wrongful conduct as to EACH and EVERY defendant in the complaint.** Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, you must number and set forth each claim in a separate paragraph. **UNRELATED CLAIMS MUST BE RAISED IN SEPARATE COMPLAINTS WITH ADDITIONAL FILING FEES. NO MORE THAN FIVE (5) TYPED OR TEN (10) NEATLY PRINTED PAGES MAY BE ATTACHED TO THIS COMPLAINT. (LR PL 3.4.4)**

CLAIM 1: Cruel and unusual Punishment (torture)
placed in shackles and beaten for mental health
reason

I was brutally assaulted by situ staff on 2
 Supporting Facts: account and also submitted to shackles (12 hours)

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CLAIM 2: _____

Supporting Facts: _____

CLAIM 3: _____

Supporting Facts: _____

CLAIM 4: _____

Supporting Facts: _____

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CLAIM 5: _____

Supporting Facts: _____

VI. INJURY

Describe **BRIEFLY and SPECIFICALLY** how you have been injured and the exact nature of your damages.

Rist and ankles have puncture wounds, hair pulled out,
face slammed into the wall, belly chains cut into my sides

VII. RELIEF

State **BRIEFLY and EXACTLY** what you want the Court to do for you. *Make no legal arguments. Cite no cases or statutes.*

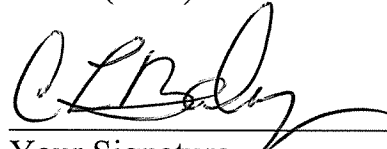
Commute my Sentence Sentence reduction
restitution for pain and suffering monetary fine

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DECLARATION UNDER PENALTY OF PERJURY

The undersigned declares under penalty of perjury that he/she is the plaintiff in the above action, that he/she has read the above complaint and that the information contained in the complaint is true and accurate. Title 28 U.S.C. § 1746; 18 U.S.C. § 1621.

Executed at U.S.P. McCready on Feb 14, 2021.
(Location) (Date)


Your Signature

Attachment E

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CORY BAILEY

Your full name

v.

Civil Action No.: 5:21CV32

(11) U.S.P MARZELTON

SHU OFFICERS

Enter above the full name of defendant(s) in this action

Certificate of Service

I, _____ (your name here), appearing *pro se*, hereby certify that I have served the foregoing Bivens Complaint ^{Cruel and unusual Punishment} ~~(Torture)~~ (title of document being sent) upon the defendant(s) by depositing true copies of the same in the United States mail, postage prepaid, upon the following counsel of record for the defendant(s) on Feb 14, 2021 (insert date here):

(List name and address of counsel for defendant(s))

[Signature]
(sign your name)